D STATES OF AMERICA COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION						OFGS FILE NO. P/4076-8			
As a below named inventor, I hereby declare that: my residence, post office address and citizenship are as stated below next to my name; that I verily believe that I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are named) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  METHODS AND APPARATUS FOR CLEANING AN IC ENCAPSULATION SYSTEM									
the specification of which is attached hereto, unless the following box is checked:									
was filed on as United States patent Application Number or PCT International patent application number and was amended on (if any).									
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.  I acknowledge the duty to disclose all information known to be material to patentability in accordance with Title 37, Code of Federal Regulations, §1.56.  I hereby claim priority benefits under Title 35, United States Code §119 of any foreign application(s) for patent or inventor's certificate or United States provisional application(s) listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:									
Prior Foreign or Provisional Application(s)  COUNTRY APPLICATION NUMBER DATE OF FILING PRIORITY CLAIMEI									
COUNTRY	AFFLICATION	NOWIBER	(day, month, year)			UNDER 35 U.S.C. 119			
						YES NO			
						YES NO			
	<u> </u>					YES NO			
I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.									
UNITED STATES APPLICATION NUMBER	DATE OF FILING (day, month, year)			STATUS (patented, pending, abandoned)					
		<u> </u>	-						
			<u> </u>						
					***				
I hereby appoint customer no. 2352 OSTROLENK, FABER, GERB & SOFFEN, LLP, and the members of the firm, Samuel H. Weiner - Reg. No. 18,510; Jerome M. Berliner - Reg. No. 18,653; Robert C. Faber - Reg. No. 24,322; Edward A. Meilman - Reg. No. 24,735; Steven I. Weisburd - Reg. No. 27,409; Max Moskowitz - Reg. No. 30,576; Stephen A. Soffen - Reg. No. 31,063; James A. Finder - Reg. No. 30,173; William O. Gray, III - Reg. No. 30,944; Louis C. Dujmich - Reg. No. 30,625, Douglas A. Miro - Reg. No. 31,643, and Michael J. Scheer - Reg. No. 34,425, as attorneys with full power of substitution and revocation to prosecute this application, to transact all business in the Patent & Trademark Office connected therewith and to receive all correspondence.									
SEND CORRESPONDENCE TO:  OSTROLENK, FABER, GERB & SOFFEN, LLP 1180 AVENUE OF THE AMERICAS NEW YORK, NEW YORK 10036-8403 CUSTOMER NO. 2352  DIRECT TELEPHONE CALLS TO: (212) 382-0700									
I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.									
FULL NAME OF SOLE OR FIRST INVENTO See Yap ONG	)R	INVENTOR'S SIGNA	TURE		DATE				
RESIDENCE (City and either State or Foreign Country) Singapore 806746					COUNTRY OF CITIZENSHIP Malaysia				
POST OFFICE ADDRESS Blk 53 Sunrise Avenue, #03-23, Singapore 806746									
FULL NAME OF SECOND JOINT INVENTOR (IF ANY)  KOCK Kien WEE					DATE				
RESIDENCE (City and either State or Foreign Country) Singapore 670680					COUNTRY OF CITIZENSHIP Malaysia				
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	UNIT COMBINED DECLARATION AND	OFGS FILE NO. P/4076 - 8						
14. (a) 47. (d) 17. (d	COUNTRY	COUNTRY APPLICATION NUMBER DATE OF FIL (day, month, )			PRIORITY CLAIMED UNDER 35 U.S.C. 119			
		7.70	(10)	,	YES NO			
				<del> </del>	YES NO			
				<del> </del>	YES NO			
					YES NO			
	*				YES NO			
					YES NO			
					YES NO			
					YES NO			
					YES NO			
					YES NO			
					YES NO			
					YES NO			
	I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.							
	FULL NAME OF THIRD JOINT INVENTOR, Shu Chuen HO	INVENTOR'S SIGNATURE	INVENTOR'S SIGNATURE					
	RESIDENCE (City and either State or For Singapore 298189		country of citizenship Singapore					
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	full name of fourth joint inventor, if any Teng Hock KUAH		INVENTOR'S SIGNATURE		DATE			
<b>F</b>	RESIDENCE (City and either State or For Singapore 760321			of citizenship ngapore				
<b>!</b>	POST OFFICE ADDRESS Blk 321, Yishun Central, #08-315, Singapore 760321							
	FULL NAME OF FIFTH JOINT INVENTOR, I Jian WU	F ANY	INVENTOR'S SIGNATURE		DATE			
	RESIDENCE (City and either State or For Singapore 760786			rofcitizenship ple's Republic hina				
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	FULL NAME OF SIXTH JOINT INVENTOR, IF ANY		INVENTOR'S SIGNATURE		DATE			
	RESIDENCE (City and either State or For		COUNTRY	OF CITIZENSHIP				
f	POST OFFICE ADDRESS		<u> </u>	•				